



**RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT**
State Form 48669 (R2/2-05)
SDH Form 51-0001

**GRANT COUNTY HEALTH DEPT.
FOOD DIVISION
401 SOUTH ADAMS STREET
MARION, IN 46953**

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name WALMART #1294	Telephone Number 765 663 8809	Date of Inspection (mm/dd/yr) 1-24-2020	ID # 27
Establishment Address (number and street, city, state, ZIP code) 3240 SOUTH WESTERN AVE. MARION	() Owner	Follow-up	Release Date 2-3-2020
Owner WALMART STORES EAST	Purpose: 1. Routine	Summary of Violations: C ___ NC 1 R ___	
Owner's Address 702 SW 8th St. Bentonville Ark	2. Follow-up	Menu Type (See back of page) 1 ___ 2 ___ 3 X 4 ___ 5 ___	
Person in Charge YVONNE ROSMAN	3. Complaint		
Responsible Person's E-mail N/A	4. Pre-Operational		
Certified Food Handler ASHLEY CUSTER 10/19/16	5. Temporary		
	6. HACCP		
	7. Other (list)		

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
304	NC		"DELI" PANS STACKED OVER EACH OTHER ARE WET FROM BEING WASHED / SANITIZED NEED AIR DRIED BEFORE BEING STORED ON A RACK IN HOT AREA	TODAY
			"BAKERY" NO VIOLATIONS AT THIS INSPECTION	
			"MEAT ROOM" NO VIOLATIONS AT THIS INSPECTION	
			"STORE" NO VIOLATIONS AT THIS INSPECTION	

Received by (name and title printed): Yvonne Rosman Sine Manager	Inspected by (name and title printed): R. Deffen FSD / Dean Smith FSD
Received by (signature): 	Inspected by (signature):
cc:	cc:

Operator Response to Inspection
State Form 80047 (2-01)

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 111 / 123
Fax 765-651-2419

DATE: 1-26-20

Grant County Health Department
401 S. Adams St.
Marion, IN. 46953

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS.

The following is a response to the inspection report prepared by the Health Department Food Safety Officer R.Dale Carr-FSIO / Dean Small-FSIO from the Grant Co. Health Department on 1-24-2020.

DATE:

1-26-20

Action Taken:

All associates in deli/Bakery have been retrained on proper wash/rinse/sanitize and air-dry procedures. management will be following up daily.

Name of Respondent: Stephanie Wright Title: Co-manager

Establishment Name: Walmart

Address: 3240 S Western Ave Marion, IN 46953

Attach additional sheets as needed.